

MAR 13 1957

Ministry of the
METHODIST CHURCH
to the victims of leprosy



"The Key to Leprosy is the Child"

states Dr. Robert G. Cochrane, world renowned leprologist and medical advisor to American Leprosy Missions, Inc. Most cases of leprosy are contracted in childhood, though the disease may not become apparent till later.

"If all little children could be separated from their infected parents, the disease could be brought under control by that means alone in due time," adds Doctor Cochrane. The separation of babies at birth from the source of contagion is an almost 100% guarantee against contagion.

Children are not only more susceptible than are adults but also are more responsive to treatment. If treated early, they may be saved entirely from the terrible deformities that plague leprosy sufferers.

These facts have brought about a change of emphasis in leprosy work. American Leprosy Missions, Inc. is helping with the care of over 2,000 uninfected children. Also great stress is given to early detection of the disease.

"Suffer the little children to come unto me, and forbid them not, for of such is the kingdom of heaven." Matt. 19:14.

The Methodist Church

... reaches out the hand of compassion to the victims of leprosy in five different countries. It is one of a hundred or more Christian agencies that are trying to show forth Christ's love toward the ten million or more who "walk alone" in eighty countries throughout the world, so tragically outcast and abhorred. The treatment and care of all afflicted with this baffling disease are too expensive and too technical for most missions to handle. That task can never be fully accomplished until the local governments take over the financial responsibility and the indigenous church the spiritual care. But in the meantime Protestant mission forces of the world are doing what they can, in cooperation with AMERICAN LEPROSY MISSIONS and THE MISSION TO LEPERS (LONDON). These latter specialized organizations provide the funds and the technical knowledge. The regular mission agencies provide the personnel.

India

Number of Leprosy Colonies	85
Population	361,900,000
Leprosy Cases (estimated)	1,700,000

Our leprosy work in India is administered by The Mission to Lepers (London) with American Leprosy Missions providing 60% of the budget for colonies which are American-directed.

Almora In 1840 a young British ensign was stationed in the lower Himalayan ranges on the border of Nepal. A man of sensitivity and compassion he was saddened by the plight of the roadside beggars just outside the town of Almora. Most of them had leprosy. But unlike others in the town who clucked their tongues in compassion and then walked on, the ensign built shelters for twenty of these outcasts, and provided for their support until he left India in 1851. He then entrusted the management of the home to the London Missionary Society, which cared for the growing colony until it was taken over by the American Methodist Mission in 1926.

Now more than a hundred patients and 20 healthy children live, work, play, receive medical treatment and worship God at this historic institution. The skilled medical superintendent is an Indian Christian, Dr. M. Masih, who is held in something akin to reverence by his adoring patients.

Other staff members: Miss C. M. Singh (nurse); Rev. P. L. Masih, (pastor).

Chandag In the eastern part of Almora District, on a ridge overlooking the beautiful valley of Pithoragarh lies Chandag Heights, made famous by an American heroine, Mary Reed.

Sixty years ago, when Hansen's Disease was still considered fearful, loathsome and incurable, this young missionary to India found that she had become its victim. Wanting to serve those similarly afflicted, Miss Reed asked to be sent to Chandag, which had been established in 1888. She served its patients faithfully and devotedly until her death fifty years later. Another missionary who had also contracted the disease, Dr. Katharine M. Young, directed the home for the next eight years until her transfer to a station higher in the Himalayan foothills.

Now an Indian, Dr. U. S. Roy, has taken charge of the medical work of the colony, whose congregation is affiliated with the Methodist Church of India. A former government doctor, the new director has fulfilled a deep desire of his father, a Christian pastor in that area, in returning to serve at Chandag.

This colony is owned by the Mission to Lepers (London) but American Leprosy Missions, Inc. has provided part of the funds for this colony for many years. The appropriation of 1955-56 is \$5,050.

Other staff members: Mr. P. A. Brambleby, Supt., and Miss Grace Lal.

Liberia

Number of Leprosy Colonies	5
Population	1,648,000
Leprosy Cases (estimated)	2,300

At the famed Methodist mission in **Ganta**, the 357 leprosy patients, who built their own village from clay and stone on the land, are among the poorest of the poor. But this year, somewhere in another part of the world, sufferers from the same disease will be set on the road to health by a gift of medicines from the Ganta patients.

For the spirit of Christian love and sacrifice in these people who have known the agony of isolation and hopelessness is so strong that they wanted to share their new helpfulness and joy with others less fortunate.

To this end they painfully accumulated \$31.50 to buy medicine for other leprosy patients. It was used for the patients at Almora, India, who wrote a letter of thanks to the Ganta patients.

\$1,000 of the maintenance funds sent by American Leprosy Missions have been earmarked for the separate care of uninfected children.

The staff includes Dr. and Mrs. G. W. Harley, Dr. Hyla Watters, Miss Mildred Black, and Miss Uniola Adams.

(Continued on page 7)

Little Known Facts About Leprosy

● There are an estimated ten million people throughout the world who are suffering from leprosy, a small percent of whom are receiving any kind of treatment or care.

● Leprosy is not as contagious as most people believe. It is much less contagious than T. B. or many other diseases, the presence of which people accept so very calmly.

● Leprosy can be cured. There are different kinds of cures. (1) In some cases there is sufficient resistance in the patient to stop the progress of the disease. Such cases may break out again. (2) There are many cases that in time seem to burn themselves out, usually leaving the patient terribly deformed but symptom-free. (3) Now great hope has arisen because of the splendid results secured through the use of the sulphone drugs. Early cases are cured. More advanced cases are rendered symptom-free.

● Children are more susceptible to leprosy than are adults. It is thought that in most cases infection comes in childhood even though the disease does not manifest itself till later.

● Leprosy is being combatted by scientific research and by practical treatment. In the U. S. A. the Leonard Wood Memorial (American Leprosy Foundation) is an example of an institution devoted to research in the field of leprosy. American Leprosy Missions, Inc. is devoted primarily to the care of leprosy victims, although the Technical Medical Advisor and a few missionary doctors associated with ALM have made and are making contributions in the field of research of outstanding significance.

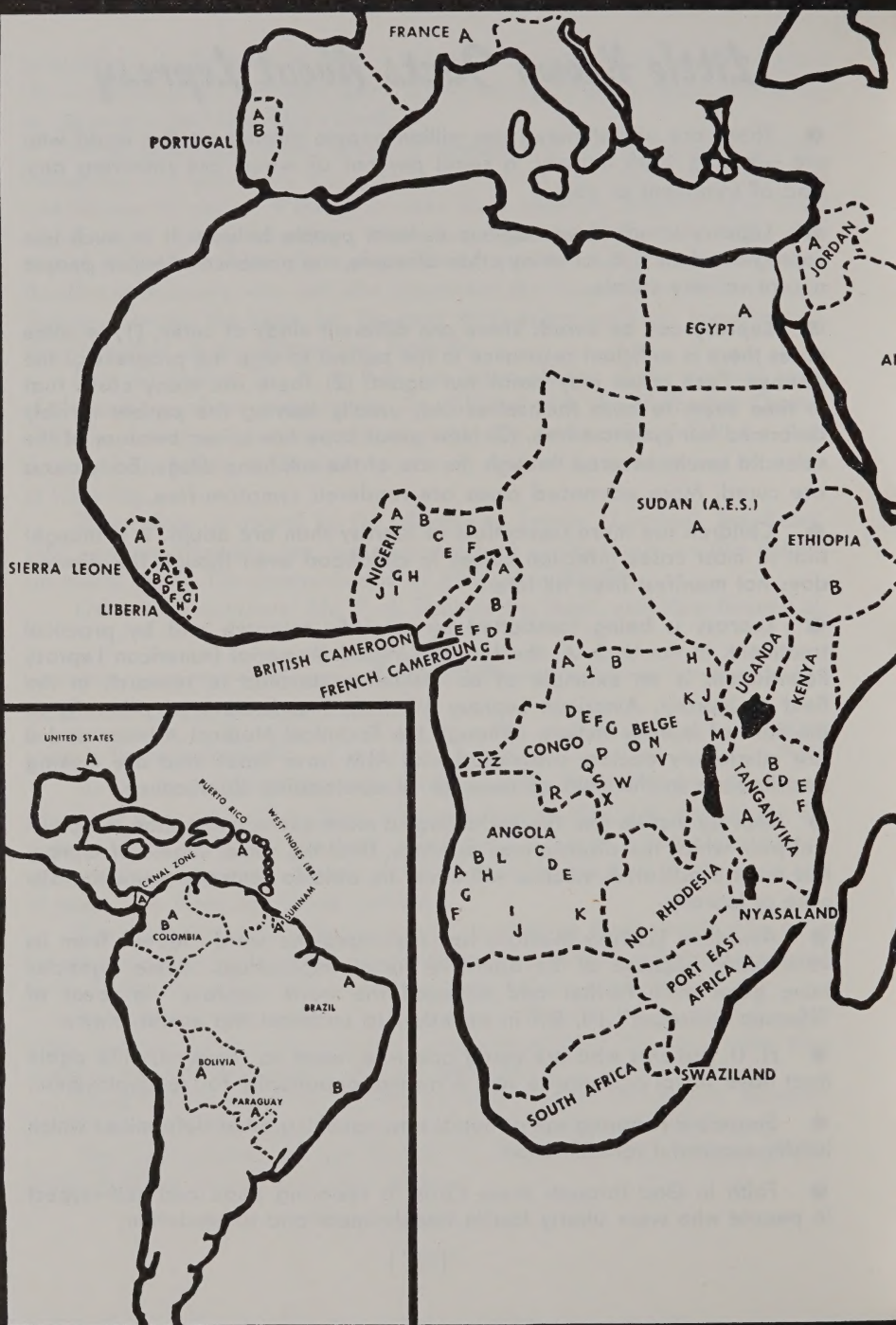
● Leprosy victims find the social stigma more excruciating than the physical pain which the disease may produce. Until the social stigma of leprosy has been eradicated, science will never be able to control or cure the disease of leprosy.

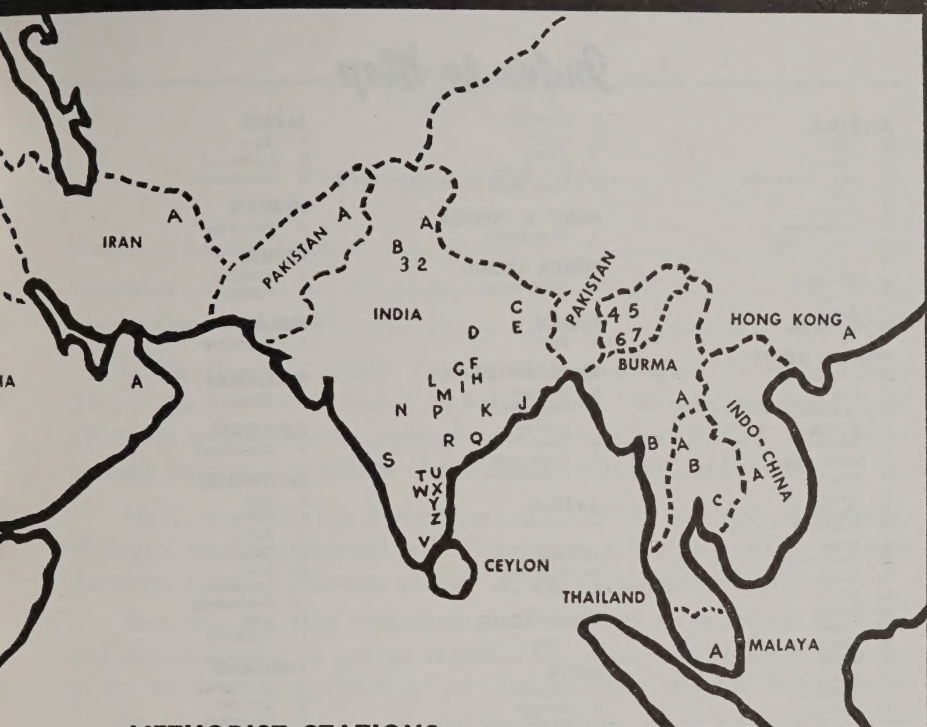
● American Leprosy Missions has expunged the word "leper" from its vocabulary because of its offensive social implications. Some agencies have gone even farther and dropped the word "leprosy" in favor of "Hansen's Disease" (H. D.) in an effort to undercut this social stigma.

● H. D. patients who are cured and who return to community life again must have social acceptance and a normal opportunity for re-employment.

● Surgery is restoring use of hands and removing other deformities which hinder successful rehabilitation.

● Faith in God through Jesus Christ is restoring hope and self-respect in people who were utterly lost in hopelessness and degradation.





METHODIST STATIONS

INDIA, ASIA

- 2 Almora
- A Chandag

LIBERIA, AFRICA

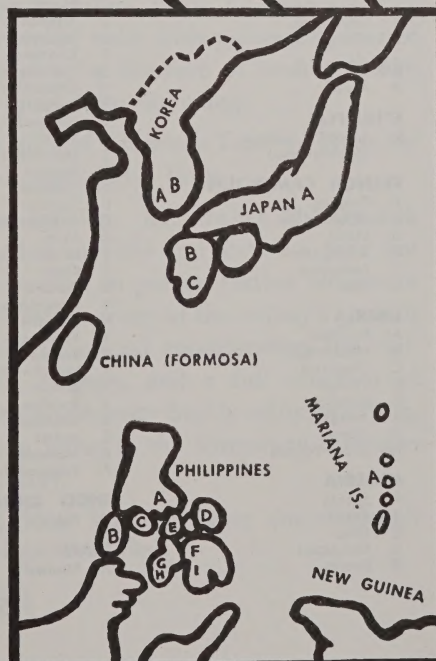
- G Ganta

PORTUGUESE EAST AFRICA (Mozambique) AFRICA

- A Inhambane

CONGO BELGE, AFRICA

- O Minga
- N Tunda
- X Kapanga



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- D Boma
- E Luonze
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- I Cavangu
- J Catota
- K Muie
- L Chissamba

CONGO BELGE

- A Karawa
- B Bili
- D Monieka
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- F Wema
- G Mondombe
- H Aba
- I Lolwa
- J Oicha
- K Mambasa
- L Katwa
- M Nyankanda
- N Tunda
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- Q Luebo
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- N Kothara
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- W Karigiri
- X Kavanur
- Y Ranipet
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- A Barrio Grande

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- A Paramaribo

Mozambique

Portuguese East Africa

Number of Leprosy Colonies	11
Population	5,781,000
Leprosy Cases (estimated)	30,000

In the Roman Catholic country of Mozambique (Portuguese East Africa) the Methodist Mission in **Inhambane** has been successfully and effectively treating leprosy patients since 1913, when Dr. C. J. Stauffacher brought the first few victims of the disease into his regular clinic.

Later, in 1925, the Federation of Women's Societies in Holland, Michigan, became interested in his leprosy work and gave money through American Leprosy Missions to buy an old Portuguese plantation.

Now, this beautiful community of Tellis, with its thousands of coffee and cocoanut trees, its groves of guava and mango and cashew, is truly, in the words of one visitor, a "paradise regained" for the 239 patients.

The cottages, many with striking furniture made by the carpenter patients, are all ornamented on the outside walls with painted figures of animals and birds and hunters. A nursery for the care of healthy babies of the patients is set on a hill a little apart from the village.

This colony is maintained by the gifts of American Leprosy Missions' auxiliaries of Holland, Michigan, and Sioux City, Iowa.

Doctor and Mrs. Stauffacher are retiring. Dr. Walter Mikulaschek was appointed to succeed Dr. Stauffacher in 1954 and served a year but was required by the Portuguese Government to pursue further studies in Portugal. Before leaving he made a careful survey of the colony's present needs, which include laboratory facilities, special consideration for children, physio-therapy and orthopaedic surgery, and a full program of farming and fruit growing to make the community highly self-supporting. The question of assigning an American nurse to the temporary direction of the colony is now pending (June 1955).

Staff: Miss Clara Bartling and Miss Victoria Lang (on furlough 1955), nurses; Rev. Per Knutsson, religious worker.

Congo Belge

Number of Leprosy Colonies	105
Population	11,259,000
Leprosy Cases (estimated)	200,000

Methodist work is carried on in **Minga, Tunda and Kapanga**. There is a total of 1,268 patients in these settlements, which are true communities, not merely asylums of refuge or hospitals for the curing of disease. Families live in their own cottages and support themselves by farming and practicing trades they have learned.

Everywhere in these colonies are evidences of the patients' skills and talents which have been developed and fostered by the nurses in charge: colorful and intricate needlework painstakingly executed by women who have no fingers; dramatic productions in a natural wooded setting with costumes made by the actor-patients; beautifully handcarved altar rails, pulpit and chairs in the chapels.

In Ngelu-k'Ongenongeno, the Village of Happiness at Minga, the Stockton-Token Children's Home, caring for 36 children, and the Mount-Hanks Surgical and Obstetrical unit have been completed.

Across the great Lomami River from Minga is the government colony of Tunda, which is under mission direction.

At Kapanga an offer of the Government to rebuild the colony and give it total support on condition that the Methodist mission provide a doctor and nurse is still pending. Meanwhile an agricultural director and his wife, who are also nurses, and a doctor who can give part-time to the colony, reached the station in 1955.

Minga staff: Dr. W. S. Hughlett, Ruth O'Toole, Myrtle D. Zicafoose.

Tunda staff: Miss Katherine Eye.

Kapanga staff: Mr. and Mrs. Alfred Broadhead; Dr. Warren Freeborn.

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Thus With Financial Aid and Technical Counseling

AMERICAN LEPROSY MISSIONS, INC. helps the missionaries of the American Churches to care for the victims of leprosy. In this way American Leprosy Missions, Inc. operates as an **AUXILIARY OF ALL BOARDS** enabling medical missionaries and others the world over to care for and often cure people with leprosy.

The hope of healing is now greater than ever before. With healing comes the necessity of rehabilitation, (1) physically, through orthopedic surgery and physiotherapy, (2) vocationally, through training to become self supporting, and (3) spiritually, through faith in Jesus Christ and through fellowship with Christians.

From where will AMERICAN LEPROSY MISSIONS get the money which has been promised to the missionaries for their leprosy work?

Only from the voluntary contributions of people who want to help with this work.

Does AMERICAN LEPROSY MISSIONS receive bequests and annuities?

Yes, write for our leaflets on this subject.

Where may gifts for leprosy work be sent?

To any accredited volunteer representative or to any address on the next page.

"Lord, if thou wilt, thou canst make me clean. And He put forth his hand and touched him saying, I will: be thou clean." Luke 5:12, 13.

The attack on leprosy is one of the most brilliant projects of the Church today. We are proud of our missionaries who are engaged in it and grateful to American Leprosy Missions, Inc. for the complete financial support of the colonies here described. Although gifts by Methodist churches to American Leprosy Missions, Inc. cannot be given World Service credit, we recommend American Leprosy Missions to the churches for gifts which will not interfere with World Service giving.

EUGENE L. SMITH

Executive Secretary,

Division of Foreign Missions

Board of Mission and

Church Extension of The

Methodist Church



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